

**Illinois Children and Family Services Advisory Council
Meeting Minutes**

May 19, 2016 3:30 PM – 5:00 PM

Committee Members Present- In Person

Carlos Rodriguez

Committee Members Present- Via Phone

Tim Egan- CHAIR

Antwan Turpeau

Jennifer Hansen

Carlos Rodriguez

Anita Weinberg

Jill Glick CO-CHAIR

Mary Crane

Bob Foltz

Maria S. Pesqueira

Marge Berglind

DCFS Staff

Nora Harms- Pavelski

Jody Grutza

Janet Ahern

Jeremy Harvey

Kristine Herman

Public

Brook Morimotto- ALTERNATIVE SCHOOLS NETWORK

Absent

State Sen. Mattie Hunter

Erin McNamee- excused

Tyshiana Jackson

Jahlisa Glenn- excused

Derek G. Velazco- excused

Billie Larkin - excused

Judge Patricia Martin- excused

Merri Ex- excused

Robert Bloom- excused

Dr. Alicen McGowan - excused

Welcome and Introduction

Chair Tim Egan started the meeting at 3:34 PM, but could not call the meeting to order due to a lack of a Quorum. The Chair requested that participants be advised of the lack of a Quorum and the anticipated building evacuation, members were given the option to call in.

Approval of Minutes from March 17, April 21 Meeting

Minutes were read and reviewed but could not be approved due to a lack of a Quorum, or majority of voting members present. Tabled for June 16th meeting.

I. Discussion Item: Strategic Plan

Discussion:

Mary Crane: I am happy to have seen that this document has a focus on trauma informed care. Trauma is infused throughout the document, which I feel is very positive. I do have 2 recommended additions:

- 1.) Include specifically that a pediatrician will be involved in the planning and evaluation of programs and initiatives
- 2.) Include a specific reference to the development of Adult Mentors. This since connection has more correlation with success than any other factor. I would like to see it explicitly mentioned.

Dr. Jill Glick: I really want to see the emphasis on the development of the medical home. And really the point of all this is that you want to see refinement and changes in the lives of youth in the system...Hopefully all of this will do that...

Point Person(s):
Jody Grutza

II. Discussion Item: Open Meetings Act

Discussion:

Marge Berglind: I want to see the protocol which requires a Quorum to be in person, are we sure that this is the law that governs this type of council? Can we adjust our bylaws to include the acceptance of over the phone as attendance? Can we pass a rule to allow voting to be allowed over the phone?

Decisions:

Janet Ahern was going to find the OMA rule that governed this topic for the council to review.

Point Person(s):
Jeremy Harvey

III. Discussion Item: Immersion Sites

Discussion:

Dr. Rob Foltz: How did you all choose the immersion sites:

Jody Grutza: We pulled our data by filed office to start knowing that we wanted a specific population of youth in our first set, we realized that it was the easiest way to get to the desired population. After this we determined if there were areas that had particular strengths or that are already on the way to improvement....We want initial successes to spur this process. We also considered areas that were wanting to be involved and interested.

Mary Crane: Why did you all select an immersion site that already had such high permanency rates...wont it be hard to show improvement in the first round

Jody Grutza: We are going to have some additional custom measures for the first site. We still want to show success but we will add some process measures, a measure of how supported our staff feel, and a measure to track culture change.

Decisions: None

Point Person(s):
Jody Grutza

IV. Discussion Item: 1115 Waiver & Managed Care

Discussion:

This project and opportunity came out to the HHS transformation with includes 12 agencies to look at how social services work can be streamlined and strengthen opportunities for all, the HHS transformation is broken into 5 focus categories

- 1.) Education and self sufficiency
- 2.) Residential to community based care
- 3.) Pay for value
- 4.) Prevention
- 5.) Data and predictive analytics

These groups all identified that here was a need to look at Behavior Health as a major driver for costs, and an understanding that the state needed to improve its service array for adults and youth.

The 115 Medicaid waiver allows for the following:

- Approval of experimental and pilot programs, with flexibility to start initiatives
- Expand Medicaid eligibility for things like supportive housing assistance (Not typically covered)
- Create and enhance service delivery systems

There is an understanding and a focus on DCFS youth, and the Public who have complex behavior health needs

- Create a managed care plan for DCFS and Non-DCFS youth with Behavioral health needs
- Reduce the existence of custody relinquishment by ensuring families have access to supports

Managed care has been in existence since 2013 for Adults, now there is an attempt to expand this to other areas.

GOALS:

- Real time data
- Provider network with a systematic consistency
- Integrated and standardized IA to evaluate programs equally
- Cross provider analysis, and comparative with apples to apples ability
- Establishment of intensive care management with CAFTM on a more frequent basis.

Outcomes:

- Increase in physical health of older youth
- Increased availability of in home and community based services
- A decrease in custody relinquishments
- Increase voice of youth and families
- A reduction in cross system and cross service silo's

Time Table: Application by July or August 2016, feedback will come in the form of town halls, work groups, and individual contacts.

Dr. Jill Glick: We would like to help with the medical component in this, I think we know that there has been some obstacles in the continuity of services and we would like to help create the solutions

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| One of the first keys for this is the need for an EMR! | |
| Screening tools for trauma on all services will be CANS | |
| <u>Decisions:</u> | <u>Point Person(s):</u> <u>Kristine Herman</u> |

V. Discussion Item: Schedule

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| <u>Discussion:</u> Members wanted to change the meeting schedule to 1x 2 months or the old schedule of 1x3 months. Allowing for additional progress on sub-groups, additional updates on Department related items, and likely is less of a demand on members to attend in person. Anita Weinberg: I think that we need to be careful about this; we need to understand how the Department wants to use us before we change our meeting schedule. Things seem to be moving quickly and I want to ensure that we can respond to the department's request and that the department can use our council to discuss changes and proposals. | |
| <u>Decisions:</u> None | <u>Point Person(s):</u> |

Meeting Adjourned at 4:30

Next Meeting: June 16, 2016